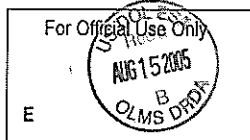


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>7260</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Joseph</u> <u>C</u> <u>Bonfiglio</u> P.O. Box, Bldg., Room No., if any Street <u>238 Main Street (suite-310)</u> City <u>Cambridge</u> State <u>Massachusetts</u> ZIP Code + 4 <u>02142</u>	4. Name, file number, and address of labor organization. Name <u>Laborers' Local 151</u> Labor Organization File Number <u>009-609</u> P.O. Box, Building and Room Number, if any Street <u>238 Main Street (suite-310)</u> City <u>Cambridge</u> State <u>Massachusetts</u> ZIP Code + 4 <u>02142</u>
5. Position in labor organization. <u>Business Manager/Secretary Treasurer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Massachusetts Laborers' Benefit Funds</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>14 New England Executive Park</u> City <u>Burlington</u> State <u>Massachusetts</u> ZIP Code + 4 <u>01803</u>	7.a. Nature of Interest, Transaction, or Income. <u>7/14/04 - 7/16/04</u> <u>Room & restaurant charges @ Health & Welfare multi day meetings</u> 7.b. Amount. <u>\$772</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Joseph Bonfiglio</u>	On <u>8/10/05</u> Date	<u>(617) 876-8081</u> Telephone Number

Name of Person Filing Joseph Bonfiglio

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Lazard Asset Management

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One Rockefeller Plaza

City New York

State New York ZIP Code + 4 10020

9. Business deals with:

- ☐ a. Labor Organization
- ☒ b. Trust
- ☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Benefit Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

1/21/04

Business Dinner @ restaurant

11.b. Approximate dollar value of such dealing.

\$60

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing Joseph Bonfiglio

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Meketa Investment Group</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>35 Braintree Hill Park</u></p> <p>City <u>Braintree</u></p> <p>State <u>Massachusetts</u> ZIP Code + 4 <u>02184</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>						
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Massachusetts Laborers' Benefit Funds</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>14 New England Executive Park</u></p> <p>City <u>Burlington</u></p> <p>State <u>Massachusetts</u> ZIP Code + 4 <u>01803</u></p>	<p>11.a. Nature of such dealing.</p> <p><u>1/28/04</u> <u>Business Meeting @ Health/Athletic complex</u></p>						
	<table border="1"><tr><td data-bbox="836 1144 1323 1186">11.b. Approximate dollar value of such dealing.</td><td data-bbox="1323 1144 1562 1186">\$33</td></tr><tr><td colspan="2" data-bbox="836 1186 1562 1522">12.a. Nature of interest held or income received.</td></tr><tr><td colspan="2" data-bbox="836 1522 1562 1560">12.b. Amount.</td></tr></table>	11.b. Approximate dollar value of such dealing.	\$33	12.a. Nature of interest held or income received.		12.b. Amount.	
11.b. Approximate dollar value of such dealing.	\$33						
12.a. Nature of interest held or income received.							
12.b. Amount.							

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Intercontinental Real Estate Corp

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1270 Soldiers Field Road

City Boston

State Massachusetts ZIP Code + 4 02135

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Benefit Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

6/28/04
Azumah Charity Golf Outing

11.b. Approximate dollar value of such dealing.

\$50

12.a. Nature of interest held or income received.

12.b. Amount.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name <u>Intercontinental Real Estate Corp</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>1270 Soldiers Field Road</u> City <u>Boston</u> State <u>Massachusetts</u> ZIP Code + 4 <u>02135</u>	9. Business deals with: <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer						
10. If 9.b. or 9.c. is checked give trust or employer's name. Name <u>Massachusetts Laborers' Benefit Funds</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>14 New England Executive Park</u> City <u>Burlington</u> State <u>Massachusetts</u> ZIP Code + 4 <u>01803</u>	11.a. Nature of such dealing. <u>9/27/04</u> <u>Educational Golf Outing</u>						
	<table border="1"><tr><td data-bbox="836 1144 1323 1165">11.b. Approximate dollar value of such dealing.</td><td data-bbox="1323 1144 1562 1165">\$50</td></tr><tr><td colspan="2" data-bbox="836 1165 1562 1501">12.a. Nature of interest held or income received.</td></tr><tr><td colspan="2" data-bbox="836 1501 1562 1558">12.b. Amount.</td></tr></table>	11.b. Approximate dollar value of such dealing.	\$50	12.a. Nature of interest held or income received.		12.b. Amount.	
11.b. Approximate dollar value of such dealing.	\$50						
12.a. Nature of interest held or income received.							
12.b. Amount.							

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Construction Industries of Massachusetts

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1671 Worcestor Road

City Framingham

State Massachusetts

ZIP Code + 4 01701

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

6/24/04

Charity Golf Outing

11.b. Approximate dollar value of such dealing.

\$50

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing Joseph Bonfiglio

File Number U-

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Massachusetts Laborers' Benefit Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts

ZIP Code + 4 01803

7.a. Nature of Interest, Transaction, or Income.

6/16/04 - 6/18/04

Room charge @ Annuity Fund Milti-day meeting

7.b. Amount.

\$603

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name The Segal Company

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 116 Huntington Ave

City Boston

State Massachusetts ZIP Code + 4 02116

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Benefit Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

6/16/04
Golf outing

11.b. Approximate dollar value of such dealing.

\$95

12.a. Nature of interest held or income received.

12.b. Amount.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name The Segal Company

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 116 Huntington Ave

City Boston

State Massachusetts ZIP Code + 4 02116

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Benefit Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

10/8/04
Golf Outing

11.b. Approximate dollar value of such dealing.

\$54

12.a. Nature of interest held or income received.

12.b. Amount.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name The Segal Company

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 116 Huntington Ave

City Boston

State Massachusetts ZIP Code + 4 02116

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Benefit Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

12/16/04
Holiday dinner meeting

11.b. Approximate dollar value of such dealing.

\$75

12.a. Nature of interest held or income received.

12.b. Amount.

Laborers' International Union of North America

General Construction Local 151

238 Main Street
Cambridge, MA 02142



Telephone: (617) 876-8081
Fax: (617) 492-0490

August 10, 2005

U.S. Department of Labor
Employee Standards Administration
Office of Labor-Management Standards
200 Constitution Avenue, NW
Room N-5616
Washington, D.C. 20210

Dear Sir or Madam:

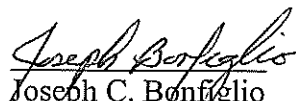
Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record or any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,


Joseph C. Bonfiglio
Business Manager
Laborers' Local 151